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# **National Enrollment Database/Defense Online Enrollment System**

## **Production Problem Reporting and Issue Resolution**



**Release 1.2**

**September 2001**

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## Revision History

Revision Number	Release Date	Changes
1.0	06/25/2001	Original document
1.1	07/19/2001	Appendix B added
1.2	10/17/2001	Process for maintaining Contractor Approved Contact NED/DOES Help Desk added. Criteria for identifying whether issues sent to the NED/DOES Help Desk or to DSO added. Appendix C added

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# Overview

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## 1.1 Points of Contact

**NED/DOES Help Desk Hotline ..... 888-240-4596**

*The National Enrollment Database (NED/DOES) Help Desk is staffed from 0800 to 1800, EST/EDT on all regular business days.*

**NED/DOES Off-Hours Support Pager (Emergency Only) ..... 877-407-5318**

*Off-Hours Support is available outside the normal business hours of the NED/DOES Help Desk, 24 hours a day, 7 days a week.*

**Note:** Please refer to Section 1.6 for response time obligations. Off-Hours Support is available only for emergencies.

**Historical Enrollment Correction Request.....(fax number) 831-655-8317**

**NED/DOES Help Desk Manager ..... Lance Riddle ..... 703-578-5366**

**DSO Customer Service Manager..... Kay Burks..... 831-583-2500 x5234**

**DEERS Division Chief..... Ginger Bassett ..... 831-583-2400 x4173**

**NED/DOES Project Management..... Janine Groth ..... 831-583-2500 x5553**

**NED/DOES Business Lead/Client Interface ..... Heather Matuschek..... 831-583-2500 x5568**

**NED/DOES Change Management Control..... Andrea Kaiser ..... 831-583-2400 x4263**

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## 1.2 Mission

This document is designed to provide comprehensive support for all critical business areas of the National Enrollment Database (NED)/ DOES application.

### 1.2.1 Critical Business Areas

The critical business areas supported by the NED/DOES application are:

- **DOES 2.0:** Dental – United Concordia Companies, Inc. (UCCI).
- **DOES 2.0:** Medical – Managed Care Support Contractors (MCSCs), Uniformed Services Family Health Plan (USFHP), Iowa Foundation (in support of Federal Employees Health Benefit Program (FEHBP) and TRICARE Senior Supplement Demonstration (TSSD) programs), Composite Health Care System (CHCS).

# Procedures to Report a Problem

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## 1.3 Contractor Obligations

Contractors must fulfill the following obligations before contacting the NED/DOES Help Desk for problem resolution:

- Only two individuals (one primary, one backup) per contractor in each region may contact the NED/DOES Help Desk. It is the responsibility of the contractor to designate these individuals, inform their organization that all issues must be routed through either of these two people, ensure these two individuals are properly trained and technically competent, and ensure compliance with this requirement.
- Contractors will forward the names, telephone numbers, and email addresses of their regions' designated primary and backup points of contact via email to the NED/DOES Help Desk, [DHD@osd.pentagon.mil](mailto:DHD@osd.pentagon.mil). Each name will be identified as to whether it is the primary or backup point of contact. For those contractors with more than one region, a single email identifying the points of contact by region is sufficient.
- Contractors will forward updates to the NED/DOES Help Desk via email when a primary or backup point of contact replacement occurs. The email will provide the replacement's notification information as identified above as well as identifying who is being replaced.

Individuals who contact the NED/DOES Help Desk who are not on the approved list, but should be, will be requested to have their manager/supervisor submit email containing updated point of contact information to the Help Desk. The Help Desk will not modify the Approved List without supporting email from the contractors.

- Individuals who contact the NED/DOES Help Desk who are not on the approved list and who are not replacing a current primary or backup point of contact will be asked to coordinate their issues with their designated points of contact.
- Contractors must make reasonable efforts to internally resolve any issue prior to use of the DMDC support services. For example, the contractor must verify connectivity on its own network.
- The contractor will provide an adequate amount of information to the DMDC so that a problem can be replicated before the commencement of DMDC's support obligation. Refer to Appendix B *TRICARE Historical Enrollment Correction Request* for details on what constitutes an adequate amount of information.
- Issues submitted with inadequate information will be returned to the contractor.
- All updates to NED/DOES must be tested and, if operable, accepted and used.

**Note:** The DMDC is not responsible for any problem caused by the following:

- Incorporation of attachment of a feature, program, or device to NED/DOES, or any part thereof.
- Any nonconformance caused by accident, transportation, neglect, misuse, alteration, modification, or enhancement of NED/DOES.
- The failure to provide a suitable installation environment.
- Use of NED/DOES for other than the specific purpose for which NED/DOES is designed.
- Use of NED/DOES on any systems other than the specified supported hardware platform and/or operating system.
- Use of defective media or defective duplication of NED/DOES.
- Failure to incorporate any previously released update.
- DISN Issues.
- External firewalls.
- Software distribution & installation of software.

### **1.3.1 Troubleshooting Procedures**

See Appendix A, *DOES Application Support Procedures*, for procedures that must be executed before contacting the NED/DOES Help Desk.

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## **1.4 Hours of Operation and Response Times**

DMDC shall provide support to the contractors twenty-four hours each day, seven days a week solely in connection with the NED/DOES application, in accordance with the procedures defined herein. Within normal staffing hours, the NED/DOES Help Desk will either receive calls immediately or respond to voicemail messages. Outside of normal staffing hours, a support pager is available for emergency situations only (such as the system is down or inoperable). The combination of telephone, voicemail, and pager support constitutes “24 x 7” support.

Normal hours of operation are from 0800 to 1800 EST on regular business days. The NED/DOES Help Desk will make a reasonable effort to communicate (via telephone) to the organization reporting the issue, within the target response times indicated in the tables below. Actual response times will vary depending on the frequency of issue reporting and available funding for NED/DOES support. Note that these tables only indicate the timeframe within which initial contact is made, and is in no way an indication or obligation that the issue will be resolved within the designated timeframe.

The following table illustrates the response time within normal hours of operation, depending on the type of impact of the reported problem based solely upon DMDC's evaluation of the issue:

Impact	Target Response Time
<b>High Priority:</b> Major Impact w/ Loss of Function A fatal error has occurred, and the system has been rendered unusable.	2 hours
<b>High Priority:</b> Major Impact w/o Loss of Function A severe error has occurred, but the system remains functional.	4 hours
<b>Medium Priority:</b> Minor Impact Unexpected or erroneous function is encountered, but does not have a severe impact on the use of the system or beneficiary care.	10 business days
<b>Low Priority:</b> Cosmetic Change/Enhancement/New Requirement The issue is: 1) of a cosmetic nature, 2) of no operational impact, 3) an enhanced function, or 4) not already provided as a requirement.	Dependent on DMDC requirements and funding

The following table illustrates the response time outside normal hours of operation, depending on the type of impact of the reported problem based solely upon DMDC's evaluation of the issue:

Impact	Target Response Time
<b>High Priority:</b> Major Impact w/ Loss of Function	2 hours
<b>High Priority:</b> Major Impact w/o Loss of Function	Next business day
<b>Medium Priority:</b> Minor Impact	N/A
<b>Low Priority:</b> Cosmetic Change/Enhancement/New Requirement	N/A

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## 1.5 Reporting Issues to the Help Desk

Problems or requests that are **not** related to historical data (such as missing history segments) or to incorrect person data, including eligibility issues, should be reported directly to the NED/DOES Help Desk. The NED/DOES Help Desk will provide assistance for resolution of issues in the areas outlined below:

- DOES Application errors
  - DOES error messages
  - DOES options not available

- KB errors
- Runtime errors
- Network connectivity problems
- Enrollment Information Transfer (EIT) problems
- Primary Care Manager (PCM) Information Transfer (PIT) problems
- Problems between Legacy and DEERS
  - Individual enrolled in Legacy, but not DEERS (DOES shows eligible, but no enrollment)
- Batch PCM changes
- Batch fee processing
- Enrollment data issues (that are not historical corrections)
  - No SSN or TIN for individual
  - Discrepancies (other than eligibility) between NED/DOES and Legacy DEERS
  - Back dating actions beyond the DOES business rules
- DMDC environment problems
- User account access, including password resets
- Software installation/upgrades

### **1.5.1 Required Information**

When reporting an issue the following information is required:

- A summary of the error or deviation.
- Any and all Social Security Numbers (SSNs) associated with the issue.
- A detailed description of what you were trying to do, including the exact steps and the fields and data values that were entered.
- The exact error message or error code received.

### **1.5.2 Additional Information For EIT and PIT Problems**

- Sponsor SSN.



- Date/Time of EIT or PIT.
- DEERS ID.

### **1.5.3 Additional Information For Legacy - DEERS Inconsistencies**

- Sponsor SSN.
- Beneficiary DDS.
- Name of beneficiary.

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## **1.6 Reporting Issues to DSO**

The DSO is responsible for researching and resolving various issues from personnel or person discrepancies to performing corrections to historical enrollment records. The contractor is responsible for establishing designated points of contact (POC) with the DSO, and the DSO will only accept issues submitted by these POCs. The contractor POCs are responsible for reviewing all DSO requests for accuracy before submission. Any request that is not clear or complete will be returned to the contractor.

### **1.6.1 Reporting Discrepancies in Beneficiary Information**

Problems or requests that are related to personnel or person discrepancies should be reported directly to DSO via *CHAMPUS Form 88R* (Appendix C). Any issue that affects the beneficiary's immediate medical care should be annotated as "urgent" on the *CHAMPUS Form 88R*. The DSO will provide assistance for resolution of issues in the areas outlined below.

- Beneficiary not eligible, but should be.
- Beneficiary eligible in Legacy, but does not show eligible through DOES.
- Beneficiary is in Legacy, but not DEERS (DOES cannot find person).
- Duplicate person (individual listed as both spouse and child or a duplicate of the same person).
- Erroneous person data (such as incorrect DOB).
- Person data differs between Legacy and DEERS (such as Legacy DOB different from DOES DOB display).

### **1.6.2 Reporting Corrections to Historical Data**

Historical enrollment changes that cannot be performed in DOES include changes to an enrollment or

Primary Care Manager (PCM) that is not the most current enrollment or PCM segment, and cannot be made current through a cancellation of a later segment via DOES. Such requests should follow the *TRICARE Historical Enrollment Correction Request* (Appendix B) procedures outlined below:

- Requests should be funneled through one Point of Contact (POC) (or back up) for each physical location. Any requests not received from one of the identified POCs, will be returned with no action taken.
- All requests must be submitted in writing, but can be submitted via FAX. The fax number is 831-655-8317.
- All requests should be submitted on the *TRICARE Historical Enrollment Correction Request* (Appendix B). All applicable sections of the form must be completed, with a note summarizing the request.
- The form must include the POC's name, telephone number, and fax number. Once the correction has been made, a confirmation fax will be returned to the POC. The analyst may contact the POC via telephone, if there is a question regarding the request.
- These requests will be handled as a priority, but the volume of requests may have a direct impact on the response time. Any issue that affects the beneficiary's immediate medical care should be annotated as "urgent" on the *TRICARE Historical Enrollment Correction Request Form*.
- Perform action to extent possible in DOES first. Indicate on the form why the corrective action could not be performed.

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## 1.7 Required Information

See Appendix B: *TRICARE Historical Enrollment Correction Request*.

See Appendix C: *CHAMPUS Form 88R*

## Issue Resolution

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### 1.8 Issue Resolution Process

The DMDC Architecture Review Board (ARB) will review problems and issues that are submitted on a weekly basis from the Issue Tracker system (see Section 1.11.3). An exception is during the first two weeks after "go-live", when this review process will occur daily.

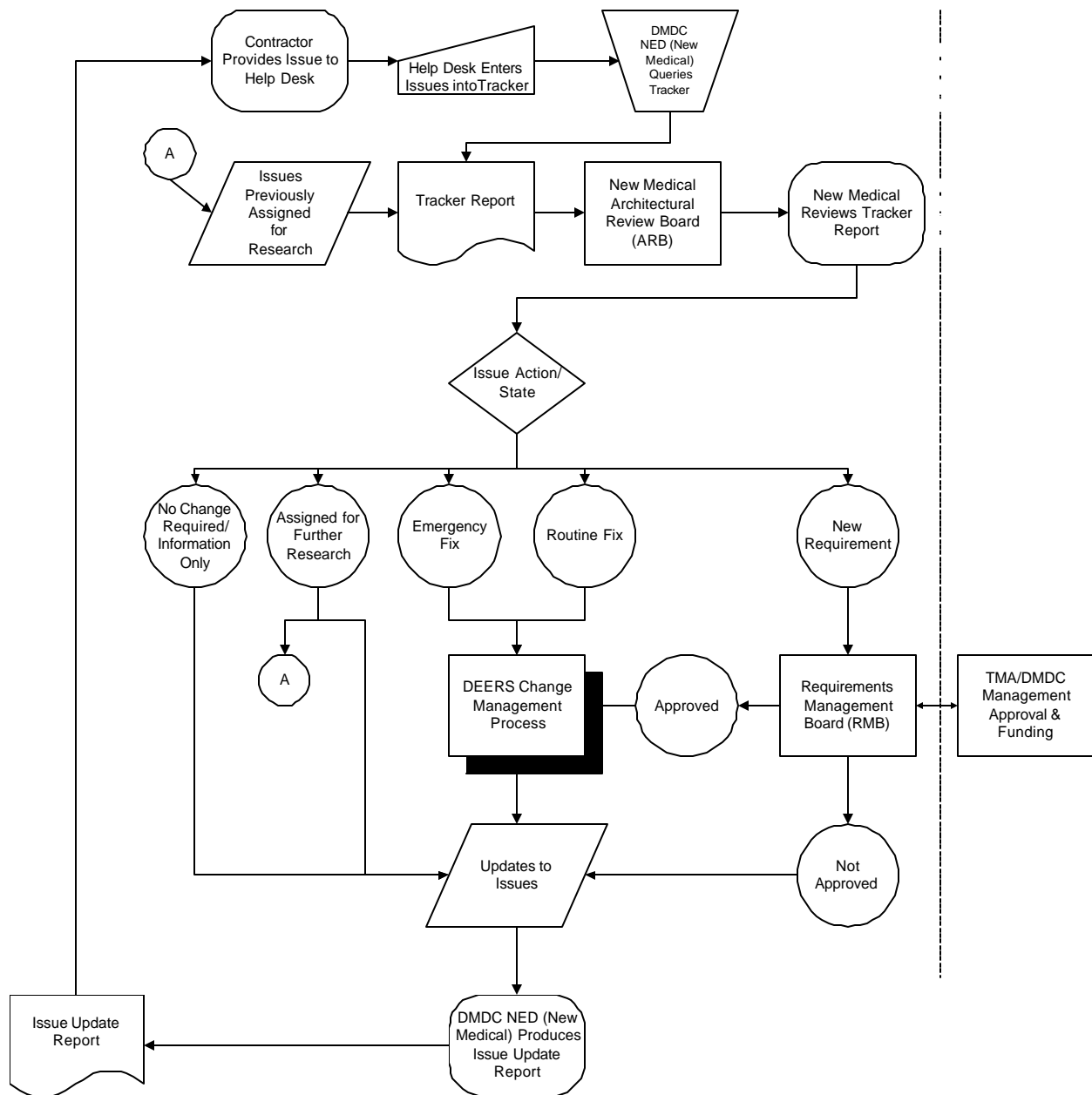
The ARB determines if the issue requires action, if it is within the defined set of requirements, whether further research or application modifications need to be performed, and the priority of the issue. If application modifications need to be made, the ARB will make the necessary work assignment. Once the work begins to correct the problem the issue will be entered into the Change Management System (see Section 1.11.4). Work assignment is based solely on the ARB's evaluation of impact.

The Task Order Manager must approve all new requirements before development begins. The Task Order Manager must obtain approval and funding from TMA and/or DMDC Management. For tracking purposes, approved new requirements are treated in the same manner as fixes.

The DMDC Quality Assurance (QA) Team internally tests routine fixes in the Model Office region. After DMDC QA has approved a change, it is released to the contractor for testing (see Section 1.12).

**Note:** Internal testing performed by DMDC QA does not preclude the discovery of errors by the contractor (External Testing).

See the following diagram of the Issue Resolution Process.



***Issue Resolution Process***

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## **1.9 Escalations**

If dissatisfied with service received, contractors should escalate issues to the:

- 1) NED/DOES Help Desk Team Manager.
- 2) DSO Customer Service Manager for data correction requests.
- 3) DEERS Division Chief or NED/DOES Project Management for new requirements.

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## **1.10 Tools**

### **1.10.1 NED/DOES Support Team Database**

The NED/DOES Support Team Database is used to log incoming telephone calls to the NED/DOES Help Desk. This database tracks the number and duration of calls reporting problems that can be solved on first contact. It also monitors the response time for issues either left via voicemail or that cannot be immediately addressed. The NED/DOES Support Team Database is designed only to record NED/DOES Help Desk encounters. Issues requiring assistance beyond the NED/DOES Help Desk are tracked using the DMDC tracking system (Issue Tracker, see Section 1.11.3).

### **1.10.2 NED/DOES Support Lessons Learned**

The NED/DOES Support Lessons Learned is a collection of lessons learned and documented by the NED/DOES Help Desk during their operations. The NED/DOES Help Desk maintains this data to provide on-going improvement in service quality.

### **1.10.3 Issue Tracker**

Issue Tracker is a database that DMDC uses to capture problems and requests. Once a problem or request has been identified as requiring application modification, it gets tracked through the DMDC Change Management System (see Section 1.11.4).

### **1.10.4 Change Management System**

The Change Management System (CMS) is the DMDC change management tool that captures application modification information as it moves through the software development lifecycle. Any issue recorded in Issue Tracker (Section 1.11.3) that is assigned for development is sent to CMS.

## Test Environment

One separate region is available for both contractor testing and training. Typically, as fixes are applied and tested, the modified software will be installed in the contractor region for testing. DMDC will coordinate with TMA and the contractors when the test region will be upgraded with software for the next major release (as opposed to continuing software modifications for the current release) and available for contractor testing. DMDC will coordinate changes with contractors to the baseline set of SSNs.

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### 1.11 Releases

New releases of the DOES software will be posted to the DMDC web site for download. Notification of new releases of DOES and back-end software to support DOES and EIT/PIT transmissions will be sent to contractors in advance via e-mail.

Changes to the following are excluded: DataBase, Core Changes, RAPIDS, ACTUR, MGIB, or other non- NED/DOES projects.

Emergency fixes are evaluated and, depending on the scope and severity, may be released to Production prior to the contractor test region. Notification of such an emergency release will be sent via e-mail.

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### 1.12 Maintenance Window

The Production and Test environments are recycled every night from 11:55 p.m. to 12:10 a.m. EST/EDT. The weekly maintenance window occurs on Saturday at 9:00 p.m. to Sunday at 6:00 a.m. EST/EDT.

## Appendix A – DOES Application Support Procedures



DOES

**DATE:** February 7, 2001  
**SUBJECT:** Steps to Take before Calling the Support Team  
**SOFTWARE VERSION:** DOES 2.0 – Medical  
**AUTHOR:** Mike Ambrosius

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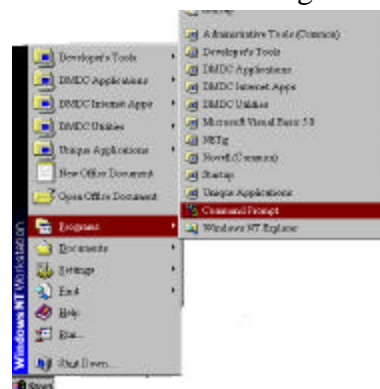
**Problem:** When an issue occurs, the location of the problem must be determined. Before calling the Support Team, conduct these tests.

**Solution Overview:** The following is a list of tests each user can execute, before calling the Support Team, to determine the nature of the problem.

### Solution

#### A. Ping the Battle Creek router (198.26.8.41)

1. Click **Start > Programs > Command Prompt**



2. At the Command Prompt, type **Ping**, leave one space, and type the Battle Creek router IP address (**198.26.8.41**).

a) The screen should look like the image below.

```
Microsoft(R) Windows NT(TM)
(C) Copyright 1985-1996 Microsoft Corp.

D:\WINNT\Profiles\      \Desktop>ping 198.26.80.44

Pinging 198.26.80.44 with 32 bytes of data:

Request timed out.
Request timed out.
Request timed out.
Request timed out.

D:\WINNT\Profiles\      \Desktop>_
```

3. Press **Enter**. The **Command Prompt** screen will either display four replies or indicate the request has timed out.

b) If the Ping returns a message indicating the request has timed out, verify that the IP address was entered correctly. If the correct IP address was entered, contact your local base communications point of contact (POC). They may have a firewall installed that does not allow pings, and may need to ping from the firewall.

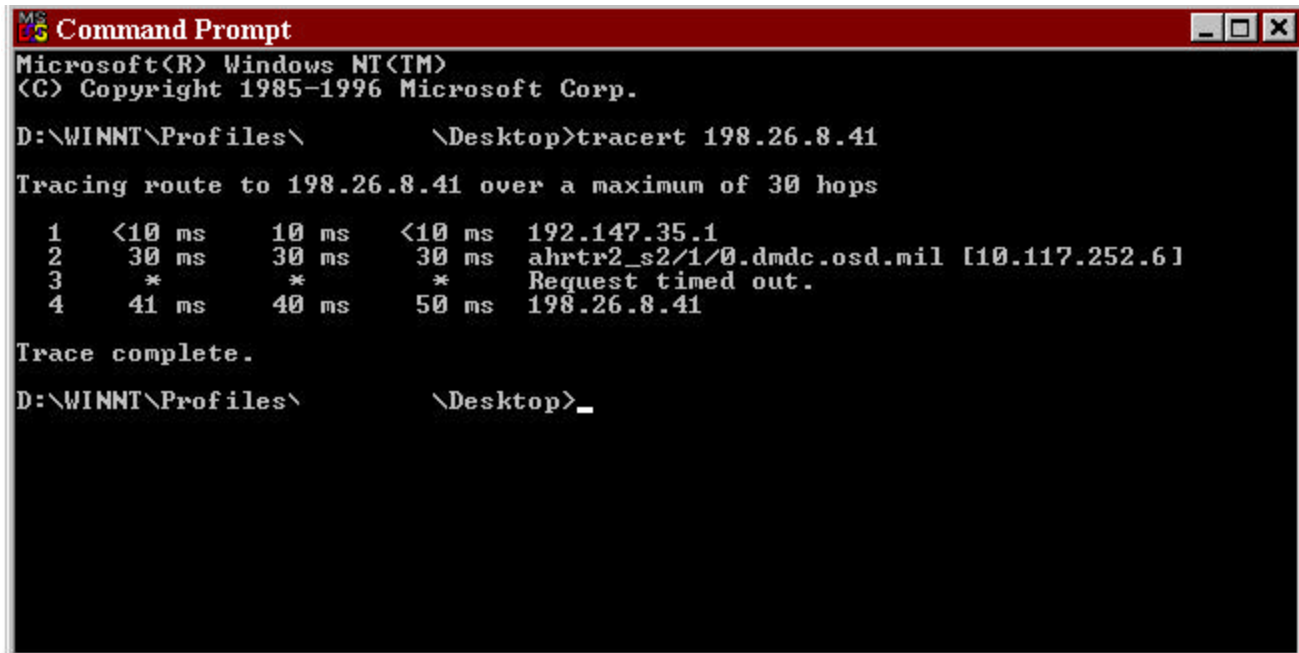
c) If the local communications point of contact (POC) can ping from the firewall and receive replies, verify with local communications that ports 3012 and 3002 are open. If they ports are open, go to Step B.

## **B. Trace the route to the Battle Creek router (198.26.8.41)**

1. Click **Start > Programs > Command Prompt**

2. At the **Command Prompt**, type **tracert**, leave one space, and type the Battle Creek router IP address (**198.26.8.41**).

a) The screen should look like the image below.



```
MS-DOS Command Prompt
Microsoft(R) Windows NT(TM)
(C) Copyright 1985-1996 Microsoft Corp.

D:\WINNT\Profiles\      \Desktop>tracert 198.26.8.41

Tracing route to 198.26.8.41 over a maximum of 30 hops

  1  <10 ms    10 ms    <10 ms    192.147.35.1
  2   30 ms    30 ms    30 ms    ahrtr2_s2/1/0.dmdc.osd.mil [10.117.252.6]
  3   *        *        *        Request timed out.
  4   41 ms    40 ms    50 ms    198.26.8.41

Trace complete.

D:\WINNT\Profiles\      \Desktop>_
```

3. Press **Enter**. You should receive a message that states "Tracing route to 198.26.8.41 over a maximum of 30 hops", and show each hop along the way. Values of **Trace Complete**, **Request Timed Out**, or **Destination Host Unreachable** will display.

a) If **Request Timed Out**, or **Destination Host Unreachable**:

- Contact your local base communications POC, and
- Verify that the 3012 and 3002 ports are open to the firewall, and
- If the ports are open and the problem is not resolved, call the NED/DOES Support Team at 888-240-4596.



b) If **Trace Complete**

- Call the NED/DOES Support Team at 888-240-4596.

**C. Calling the NED/DOES Support Team** (888-240-4596).

1. If you are able to Ping and Trace the route to the Battle Creek router (198.26.8.41), but the problem still persists, call the NED/DOES Support Team at 888-240-4596

## Appendix B - TRICARE Historical Enrollment Correction Request

POC NAME \_\_\_\_\_

PHONE# \_\_\_\_\_

FAX# \_\_\_\_\_

### TRICARE HISTORICAL ENROLLMENT CORRECTION REQUEST

Date: \_\_\_\_\_

Sponsor Name: \_\_\_\_\_

Sponsor SSN: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

Beneficiary DDS: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

Beneficiary DDS: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

Beneficiary DDS: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

Beneficiary DDS: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

Beneficiary DDS: \_\_\_\_\_

CIRCLE ONE: Enrollment

Enrollment Cancel

Enrollment Change Start Date

Disenrollment

Disenrollment Cancel

Change End Date & Reason

PCM Add

PCM Cancel

PCM Change

Transfer

Transfer Cancel

DOES CURRENT VALUE

CHANGE to NEW VALUE

Plan Coverage Code:

Enrollment Start Date:

Lockout Indicator:

Provider Type Code:

DMIS ID:

PCM Region:

PCM Name:

PCM ID:

PCM Start Date:

PCM Prior End Date:

PCM Prior End Reason:

Enrollment End Date:

Enrollment End Reason: \_\_\_\_\_

Description of error not allowing  
correction/enrollment/disenrollment \_\_\_\_\_

Note: If enrollment includes Civilian PCM provide all necessary information for the provider:

Name \_\_\_\_\_  
ID # \_\_\_\_\_  
ID Type Code \_\_\_\_\_  
ZipCode \_\_\_\_\_  
Phone Number \_\_\_\_\_

#### REQUIRED FIELDS

(New or Current values unless specified otherwise.)

Enrollment	All fields except Enrollment End Date and Enrollment End Reason.
Enrollment Cancel	Plan Coverage Code, Enrollment Start Date.
Enrollment Change Start Date	Plan Coverage Code, Enrollment Start Date.
Disenrollment	Plan Coverage Code, Enrollment Start Date, Enrollment End Date, Enrollment End Reason.
Disenrollment Cancel	Plan Coverage Code, Enrollment Start Date, Enrollment End Date.
Change End Date & Reason	Plan Coverage Code, Enrollment Start Date, Enrollment End Date, Enrollment End Reason.
PCM Add	Provider Type Code through PCM Prior End Reason.
PCM Cancel	Provider Type Code, DMIC ID, PCM Region, PCM

	Start Date.
PCM Change	Provider Type Code through PCM Prior End Reason (current and previous).
Transfer	All fields except Enrollment End Date and Enrollment End Reason.
Transfer Cancel	Plan Coverage Code, Enrollment Start Date.

## **Appendix C – CHAMPUS Form 88R**

*(See next page)*

# DETERMINATION OF ELIGIBILITY/CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE UNIFORMED SERVICES

**PURPOSE:** To determine eligibility of the patient named hereon to receive medical care under the Civilian Health and Medical Program of the Uniformed Services

**REFERENCES:** DoD 6010.8-R, OCHAMPUS Manual 6010.24-M, OCHAMPUS Manual 6010.50-M

## SECTION I (To be completed only by OCHAMPUS, a Fiscal Intermediary, or a CHAMPUS Contractor)

1. TO

PATIENT		SERVICE MEMBER (Sponsor)	
2. NAME (Last, First, Middle Initial)		9. NAME (Last, First, Middle Initial)	10. GRADE/RATE
2a. SOCIAL SECURITY NUMBER		11. SERVICE <input type="checkbox"/> USA <input type="checkbox"/> USN <input type="checkbox"/> USMC <input type="checkbox"/> USAF <input type="checkbox"/> USCG <input type="checkbox"/> PHS <input type="checkbox"/> NOAA 12. STATUS <input type="checkbox"/> ACTIVE DUTY <input type="checkbox"/> RETIRED <input type="checkbox"/> DECEASED <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> RESERVES <input type="checkbox"/> VA <input type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER (Explain in Block 15)	
3. RELATIONSHIP TO SPONSOR (If pertinent)	4. DATE OF BIRTH (If pertinent)		
5. DATE OF MARRIAGE (If pertinent)	6. DATE OF DIVORCE (If pertinent)		
7. PERIOD OF MEDICAL CARE FROM:		13. SOCIAL SECURITY NUMBER	
THRU:		14. UNIT, POST, BASE OR STATION (AD); HOME ADDRESS (RET)	
8. LAST KNOWN ADDRESS		15. REMARKS	
16. REQUESTOR'S SIGNATURE	17. TITLE	18. ORGANIZATION	19. DATE

20. RETURN TO

## SECTION II (To be completed by the verifying organization and returned to address in item 20)

21. PATIENT'S ELIGIBILITY DURING PERIOD SHOWN IN ITEM 7 IS AS FOLLOWS:			
<input type="checkbox"/> ELIGIBLE DURING ENTIRE PERIOD <span style="margin-left: 100px;"><input type="checkbox"/> NOT ELIGIBLE (Explain in Block 22)</span>			
<input type="checkbox"/> ELIGIBLE DURING PART OF PERIOD: FROM: _____ THRU: _____			
<input type="checkbox"/> CANNOT BE DETERMINED FOR REASONS SHOWN IN BLOCK 22			
22. REMARKS			
23. SIGNATURE OF VERIFYING OFFICER (Sponsor's signature not authorized)	24. TITLE	25. ORGANIZATION	26. DATE

CHAMPUS FORM 88R  
JUNE 1990

Previous editions of this form are obsolete

(Local Reproduction Authorized)

## REQUIRED FIELDS

SECTION 1 BLOCK 1	Indicate it is a DOES Problem
Blocks 2-4 and 9-13	Must be completed
Block 15	Explain the data problem causing the problem with the enrollment.
Blocks 16-19	Must be completed
Block 20	Include POC name and return fax #
Section II Blocks 21-26	Do write in these blocks. DSO response is added here.

Note: All sections listed above must be completed before 88R form will be processed.  
Do not write the problem on the fax cover sheet. Each form is processed separately.

If it is an enrollment correction, the TRICARE Historical Enrollment Correction Request form should be used.

The DOES Help Desk should first be called for enrollment functionality problems. (Enrollment Button grayed out, etc.).

If it is a discrepancy with the date of birth, spelling of the name, etc., refer the beneficiary to the nearest ID Card Issuing Facility with the appropriate documentation. The result would be a more timely record correction.